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DEPARTMENT OF THE NAVY
Office of the Chief of Naval Operations
Washington, DC 20350-2000
Headquarters, U. S. Marine Corps
Washington, DC 20380-0001

OPNAVINST 6530.2C
OP-093
CMC-MED
20 February 1989

OPNAV INSTRUCTION 6530.2C

From: Chief of Naval Operations
Commandant of the Marine Corps
To: All Ships and Stations

Subj: DONOR SUPPORT FOR
DEPARTMENT OF THE NAVY
BLOOD PROGRAM

Ref: (a) DODDIR 6480.5 of 16 Jun 72
(enclosed in reference (b))
(b) NAVMEDCOMINST 6530.1E
(NOTAL)
(c) NAVSUPINST 4061.9N

1. Purpose. To prescribe policies regarding donor support for subject program.

2. Cancellation. OPNAVINST 6530.2B.

3. Background

a. Reference (a) describes the Military Blood Program and provides general guidance for the operation and interface of the blood programs of the three services. Reference (b) implements reference (a) and establishes additional guidance for the Navy Blood Program. Included in the guidance provided by references (a) and (b) are the following general responsibilities.

(1) Maintain a rapid expansion capability to collect, process, and ship blood products for the support of operating military forces during mobilization or contingency periods.

(2) Meet the overall blood product requirements of all patients receiving medical care in military medical treatment facilities.

b. The responsibilities listed in 3a(1) and (2) drive the continuing requirements for all levels of all elements of the Navy and Marine Corps to maintain an awareness of the life-saving and

life-sustaining importance of the act of donating blood.

4. Donor Priorities. In view of the frequently conflicting demands made for donors, priorities of donor availability must be established.

a. Requirements for donors to support day-to-day operations of naval health care facilities shall receive first priority.

b. Requirements for donors to meet Naval Medical Command assigned quotas for contingency or other situations shall receive second priority.

c. Requirements for support of other government blood banking facilities shall receive third priority.

d. Requests for donors by nonprofit civilian blood banking facilities in the local community shall receive fourth priority. Particular emphasis within this priority shall be given to supporting American Association of Blood Banks affiliates, American Red Cross, and other local blood banks which have reciprocal support agreements with naval health care facilities. In all instances where donor support of civilian institutions conflicts with fulfillment of naval blood needs, on-base access of blood drawing teams from such institutions must be limited or denied.

e. All other requests for donors shall receive fifth priority.

5. Donor Availability

a. Department of the Navy Blood Program

(1) A command responsibility is to provide donors of requested blood groups and types, at the frequency, and in the quantities necessary to enable naval health care facilities to maintain an adequate working inventory of blood in the

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appropriate groups and types for day-to-day patient care and other blood requirements. Interruptions in working and training schedules will be inevitable as donors should normally be made available during regular working hours, and should not engage in stressful activity for approximately four hours after donation. However, close coordination and cooperation between the providing command and the blood collecting activity can minimize donor work-hour losses. Naval health care facilities are responsible for establishing a reasonable schedule for blood collection dates at each Navy and Marine Corps installation within its area of medical responsibility where it conducts blood donor operations. Naval health care facilities that provide principal health care support for Army and Air Force installations shall seek to utilize these potential donor populations. Likewise, where an Army or Air Force health care facility provides the principal health care support for a Navy or Marine Corps installation, the command shall make donors available to such health care facilities.

(2) Whenever possible, commands shall develop and maintain in current status, listings by blood group and type of all potentially available blood donors. Naval health care facilities shall utilize such listings to ensure that blood is drawn in the specific numbers, groups, and types required to meet demonstrated or predicted needs. Such listings can be particularly important when extraordinary demands for a specific blood type are incurred by a blood bank. In these situations, collecting blood from donors with random blood types can result in uneconomical blood excesses in noncritical blood types and unnecessary time losses to commands providing blood donors in response to the shortage. The donor motivation and education program required by subparagraph 5a(3) shall include education of donors as to the necessity of obtaining only the amounts, groups, and types of blood required at the time of donor drawing.

(3) Commands shall maintain a program of donor motivation and education. The most important consideration in motivating donors is a forthright appeal to the humanitarian feelings of

Navy and Marine Corps men and women. Particular emphasis should be placed on the fact that the Sea Services "take care of their own." Closely related to this type of motivation is an information campaign in which all personnel are made aware of the need for blood and what is involved in donating. Some individuals are reluctant to donate, because they fear pain or some adverse affect to their own health. These psychological barriers to enthusiastic donor response can generally be dispelled by a vigorous blood donor information program. Commands are also encouraged to provide specific incentives. These incentives may include personal recognition by presentation of citations for donors achieving gallon (eight donations) increments of blood donated, listing of donors in station and ship newspapers, special meals, special liberty, and so on.

b. Local Civilian Community Blood Programs. Since volunteer military personnel provide the basic blood supply for naval health care facilities and contingency requirements, their availability as donors for local, nonprofit civilian community blood programs must necessarily be subordinate to the fulfillment of naval medical requirements. Civilian employees of the Navy and Marine Corps may, of course, support local civilian programs without restriction on their availability. Commanding officers may grant access to their activities on a periodic basis to blood drawing teams from nonprofit civilian programs according to the local situation. Appropriate physical accommodations should be made available for civilian drawing teams and on-base publicity or appeals should be coordinated with appropriate command officials. Commands will not provide incentives to encourage donor response to civilian programs, but command interest in providing reasonable support for these programs is necessary. Commands will exercise full control over on-base military blood donations to nonprofit civilian community blood programs and shall ensure the following:

(1) All requests from civilian blood banks for permission to conduct on-base or on-board blood collection efforts in military populations

are fully coordinated in advance with the local military medical command having a blood collecting capability to determine that the civilian blood collections will not:

(a) Interfere with the local military health care activity's ability to collect sufficient quantities of blood to meet the day-to-day needs of its patients.

(b) Deplete the reserve of eligible military blood donors to a point where the local military health care facility is compromised in its ability to execute its mission to provide blood products in support of contingency and mobilization requirements.

(2) In all cases, nonprofit civilian blood bank donor operations will be controlled to a degree where a minimum of 25 percent of the command's active-duty military population is maintained in reserve to meet potential military mobilization or contingency blood collection requirements. If civilian agencies fail to comply with any of these requirements, permission to come on base may be suspended, to ensure that Armed Services blood requirements can be met.

(3) All Memorandums of Understanding (MOU's) developed with nonprofit civilian collection agencies, granting blood credits in exchange for access to donors, must be fully coordinated with the local military medical command having donor blood collection capabilities. All agreements must specify that credits will be the property of the local military medical command having transfusion service capabilities.

(4) All civilian blood collecting agencies will promptly report the total number of units of blood drawn, military and civilian, to the command blood program point of contact, for quarterly submission to the local military medical command having donor blood collection capability.

c. Commercial Blood Banks. It is Department of Navy policy to encourage the

voluntary donation of blood as a humanitarian act. On-base access to donors by commercial blood banks and plasmapheresis centers (those operated for profit or which offer monetary pay to donors) or on-base publicity in their behalf is not authorized. However, individuals who desire to donate to commercial enterprises off-base during nonduty hours may do so.

6. Donor Nourishments. It is recommended that commands at which blood is drawn provide a full meal at, or near, the site of blood donations as a dietary supplement to blood donors. Donor nourishments are both medically indicated and a major incentive for blood donations, and are properly chargeable against operating funds of the medical activity drawing the blood. They should not be charged against activity ration allowances. The charge for meals will be per the rates prescribed in reference (c). The actual cost of supplementary nourishments will not exceed the charge of the dinner meal per person.

7. Organizational Relationships

a. Each activity providing or drawing blood donors shall designate within the command structure, a point of contact for matters relative to the Department of the Navy Blood Program. Functions to be performed by the organizational element so designated shall include liaison with the local military medical facility having donor blood collection capability regarding military and civilian collection schedules, MOU's and credits, and the numbers of units collected. Additional functions include conducting a blood donor education and motivation program, arranging for the provision of donors, coordinating the provision of physical facilities for mobile blood drawing teams, and arranging for donor nourishments.

b. An atmosphere of mutual cooperation is expected to prevail between those military medical activities that require blood donor support and those military activities that are requested to provide that support. Every effort should be made to settle any differences at the command level. If irreconcilable differences

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occur, they may be referred to the area or regional coordinator for arbitration and settlement on a case-by-case basis.

8. Blood Program Support. Addresses at all levels of command shall ensure vigorous support of the Department of the Navy Blood Program because of its importance to the welfare of Navy and Marine Corps personnel and their families.

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